PTO/SB/06 (08-03)
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- '	Inder the Paperw	ork Reduction Ad	t of 1995, r	o persons are re	quired to respond	d to a	a collection of in	ormation unit	ess it disp	DEPARTMENT (lays a valid OMB	control number
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED NUMBER EXTRA				BER EXTRA		RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a))							\$	OR		\$	
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C-II						J	+\$=		OR	+ \$=	
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL		OR	TOTAL .	Ŀ	
CLAIMS AS AMENDED - PART II											
(q	25/17	(Column 1)		(Column 2)	(Column 3)		SMALL E	YTITM	OR	OTHER SMALL	R THAN ENTITY
AMENDMENT A	1611	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
Ž	Total (37 CFR 1.18(c))	38	Minus	"50	= Ø	11	x \$_ =	, ==	OR .	X \$ =	FEE.
EN	Independent (37 CFR 1.18(b))	2	Minus	". 3	= 8	1	x \$ =				_/_
₹	FIRST PRESENT	TATION OF MULTIP	PLE DEPEND	ENT CLAIM (37.0	FR 1 16/di)				OR	× \$=	_/
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						ן נ	+ \$ = TOTAL		OR	+ \$ = TOTAL	- /
				•			ADD'L FEE		ÖR	ADD'L FEE	<i>/</i> -
_		(Column 1) CLAIMS	·	(Column 2) HIGHEST	(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADD)- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))		Minus	**	=		x \$=		OR	X-\$ =	
EN	Independent (37 CFR 1.16(b))	•	Minus	***	=	Ī	x \$ =		OR	x \$=	·
₹	FIRST PRESENT	ATION OF MULTIP	LE DEPENDI	ENT CLAIM (37 CI	FR 1.16(d))		+\$=		OR I	+s =	
							TOTAL ADD'L FEE ·		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)	_				_	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
S	Total (37 CFR 1.18(c))	*	Minus	**	=	Γ	x \$=		OR	x \$ =	
Ē	Independent (37 CFR 1.18(b))		Minus	***	=	1	x \$ =		ı		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$ =		OR OR	x s= + s =	
	If the entry in	lumn 1 ie laee th	an the cate	in column 2, write	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
	' If the "Highest N	lumber Previous! umber Previous!	y Paid For" v Paid For"	IN THIS SPACE IN THIS SPACE IN THIS SPACE IN	is less than 20, e	nter	! *				

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.